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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/646,243
	Filing Date	August 22, 2003
	First Named Inventor	Gust H. Bardy
	Art Unit	3735
	Examiner Name	Navin Natnithithadha
Total Number of Pages in This Submission	Attorney Docket Number	020.0341.US.CON

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input checked="" type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance communication to (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Postcard
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Cascadia Intellectual Property		
Signature			
Printed name	Krista A. Wittman		
Date	March 1, 2007	Reg. No.	59594

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
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Typed or printed name	Lali Liparteliani	Date	March 1, 2007

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Gust H. Bardy

Application No.: 10/646,243

Filed: August 22, 2003

Title: System And Method For Diagnosing And
Monitoring Respiratory Insufficiency For
Automated Remote Patient Care

Art Unit: 3735

Examiner:
Navin Natnithithadha

Attorney Docket No.: 020.0341.US.CON

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

DRAWING TRANSMITTAL LETTER

Sir:

Enclosed herewith please find:

- () _____ sheets of redlined drawing(s) which indicate proposed changes to the drawing(s). Upon approval of these proposed changes, formal drawing(s) will be submitted.
- () _____ sheets of corrected formal drawing(s), as required by the Notice of Patent Drawings Objection (PTO-948) which accompanied the Office Action dated _____.
- () _____ sheets of corrected formal drawing(s), as required by the Notice of Patent Drawing(s) Objection (PTO-948) and approved in the Notice of Allowability dated _____.
- (X) 28 sheets of replacement drawing(s) and 2 sheets of annotated drawings.

Examiner's approval of the entry of these drawings is respectfully requested. No new matter has been added.

Respectfully Submitted,

Customer No. 49475

By 
Krista A. Wittman

Attorney/Agent for Applicant(s)
Reg. No. 59594

Date: March 1, 2007

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